ROAD TO

RECOVERY

STORIES FROM YOUTH CANNABIS USERS

Authors: Mariyam Malsha Muneer, Aishath Nasheeda, Aishath Zara Athif, Mariyam Luhya Ismail, Abdulla Laisy Affilitation: Villa College

Presenting Author: Mariyam Malsha Muneer

INTRODUCTION

The drug use population under the age of 24 years was about 72%

The age of onset for consuming drugs is 15 years (United Nations Office on Drugs & Crime (UNODC), 2013)

Addiction has either directly or indirectly affected every household in the Maldives (Mortimore, & Stimson, 2010)

Drug users, prison officials, and drug workers collectively asserted that relapses are frequent occurrences and expressed dissatisfaction with the current system's inability to diminish demand

Templer (2019)



AIM

To explore the lived experiences of cannabis consumption, particularly young male adults who completed the National Drug Agency's (NDA) Program used for treating cannabis addiction in the Community Service Centre located in Male', Maldives.

RESEARCH QUESTIONS

What are the initial experiences that contributed to the development of cannabis use?

What are the subjective experiences of individuals regarding NDA's Program?

NATIONAL DRUG AGENCY

The National Drug Agency (NDA) is a government establishment, tasked with tackling drug-related concerns; including demand reduction and drug rehabilitation.

The NDA runs a General Drug Rehabilitation Treatment Program for individuals apprehended by court orders for cannabis consumption.



Stages

Stage 1 – 1 month duration, 5 weekdays

Stage 2 – 1 month duration, 3 weekdays

Stage 3 – 1 month duration, 3 weekdays

Stage 4 – 3 months duration, 2 weekdays

Signing in

Stage 1 - 20 signatures required

Stage 2 – 12 signatures required

Stage 3 – 12 signatures required

Stage 4 – 24 signatures required

Counselling sessions

Stage 1 – 1 session per week

Stage 2 – 1 session per month

Stage 3 – 1 session per month

Stage 4 – personalized accordingly

Family counselling: 1 session per stage

Classes - stage 1

Anger management

Stress management

Dealing with negative peer influence

Assertiveness and communication

Problem-solving and decision making

Conflict resolution

Values and norms

Building self-esteem

Relationship building and dealing with distress

HIV, AIDS, & STIs

Drug education and addiction process

Identifying warning signs and craving management

Process of relapse and relapse prevention

Dealing with stigma

4 classes concerning relgion (Islam)

Classes-stage 2

Healthy lifestyle

Career development

Emotional management

Financial management

Repentance and forgiveness

Craving management (Islamic viewpoint)

Family responsibility (Islamic viewpoint)

Drug education (Islamic viewpoint)

Urine Analysis

5 days per week

DESIGN

Qualitative approach

PARTICIPANTS

Purposive sampling

Inclusion criteria:

 English-speaking, Maldivian males aged 18-33, and have completed the NDA's program within the last two years

Exclusion criteria

 Does not understand English, is not a Maldivian, is female, and has not completed in the NDA's program within the last two years

INSTRUMENTS & MATERIALS

Semi-structured interview guide

Face to face & online interviews

Face validation of the responses was requested by sharing transcriptions with the participants

DATA COLLECTION PERIOD

May 2024

DATA ANALYSIS

Audio recordings went through verbatim transcription - codebook created- themes and subthemes identified

FIRST TIME EXPERIENCE

- Life situation lonely, small living space, need for escape
- Motivations: peer pressure, new experience, imitation
- No consequences
- Form of escape from negative life events, described mostly as a good experience



Growing up we **lived in a small place** in Male'. My family was **struggling**. As my house is very **crowded**, I spent more time outside with my friends. They are like family... hangout every day near our neighbourhood. We went to play football and swimming and became very close. Then as we grew up we started to use **cannabis together**



I got dizzy and was just stuck to the ground. Everything everyone was saying and doing was funny. It was a good experience. The emotions were all funny, and I wanted to try it again.

WHAT LED TO CANNABIS USE (INITIAL EXPERIENCE)

Smoking

Peer pressure

Ease of access

Psychological: to escape, stress relief, breakup,

Numbness

Physiological: to increase appetite, to help sleep

....we finally **broke up**. This caused me to get into **smoking more**.

I assumed it was a rolled tobacco cigarette given to me.

But if youre always around your **friends who use** it around you, then psychologically you would think you **need to try it.**

Then sometimes when you're living your life and you get **stressed** about something... **stressed** about **work**... **cannabis** is the **solution** for the stress and anxiety... the solution is to use it, have a session.

WHAT LED TO CANNABIS USE (INITIAL EXPERIENCE)

Need for group belongingness

To imitate others
Smoking without knowing what it is
As a try-out

I chose **cannabis** because it was the most **easily available** back then.

It was marketed a lot in school, people would try to sell it to me...But I ended up smoking as my friends kept telling me... they really enjoyed it when I would smoke with them. They were very involved and wanted me to be a part of it

But whenever I have a headache about something - I mean when I get **stressed** about something I would **call a friend and smoke up.**

Lack of information before use



All i knew is that it (cannabis) was something people use to get high, and whatever movies portrayed.



You **don't** really **know** what it is, but you do it because it's fun.



It was safer compared to other drugs, I mean it is even called **medical marijuana**. It is the most widely used drug.

FINDINGS - PROGRAM PERCEPTION

POSITIVES OF THE PROGRAM

Support from counsellors
Classes being informative
Advantages if the client cooperates
Job offers
International aid



Counsellor was very good. She supports me - she is the only one who supports me from NDA. the only one who encouraged me from NDA. Well, the counsellor I got anyway. Very helpful.



The **information** they share is really **good**. They really **teach** you what **hash** is, and what **marijuana** is. For example, one who doesn't know and smokes, they would get **a lot of education** about what it is.



... if the **client cooperates**, then they will speak to the court and make things **easier** for the client...



...They told me that they get a lot of **international** aid, a lot of money...

FINDINGS - PROGRAM PERCEPTION

CHALLENGES OF THE PROGRAM

Program implementation
Program content
Negative experiences with staff
Clash of work and program timing
Financial aid not invested
Emotions of loneliness and scared

Is that what you would call a treatment? The person who goes to the treatment doesn't even understand the treatment...When you finish the treatment, you should know the consequences and the weight of your addiction, then that can even motivate you to stop. But here, currently we don't feel that



It wasn't a program specialized for weed addiction...And they are better specialized to deal with heroin users. They don't really have a treatment specialized for cannabis or other stimulants.



Then plus even to start the program, I had to wait over a year due to their backlog. I waited over a year after my court verdict... I kept calling and calling them

FINDINGS - ABOUT THE PROGRAM

MOTIVATIONS TO COMPLETE THE PROGRAM

To clear the police record
Seeing what friends are going through
Avoiding jail time
Wanting to stop
Change of perspective
Support from family



then I started to **see what** my **friends** were **going through** after smoking.



And you will have to serve 3-5 years in jail. Yeah, only 2 options. So of course, everyone would want to be labelled as an addict and that they need help... who would want to go to jail if provided the opportunity



Motivation was just how much I wanted to stop. I mean I went 3 times, but the last time, it really hit me. That I was doing something not cool. So I was very focused the last time.

CONCLUSION

Limited information on the drug

Young age for first-time use; as confirmed with previous studies

Smoking as a gateway drug

It is good that the program exists, based on their motivations, the program can be promising for users

LIMITATIONS & RECCOMENDATIONS

To include NDA staff perspectives

To include participants' family members perspectives

Longitudinal studies to capture the lived experiences in-depth

Mixed method

Based on findings, peer pressure resistance is important; schools can hold sessions to create awareness

Prevention is better than cure, more awareness is needed for our society; taboo topic in society.

Adequate resource allocation

Treatment personalized for cannabis addiction

REFERENCES

بَرْسِعُ ۚۚ سُّبُسُ مُرِّرُ مُ مُسُّ مُنْ مُكُورُدُ. (2013). .(2013 Maldives 2011/2012 use survey: Maldives 2011/2012 مُرْسِعُ ۚ سُنْ مُرْدُ مُنْ مُنْ مُكُورُدُ.

National Drug Agency, Maldives. (2021). Situational Analysis of Drugs in the Maldives. World Health Organization. https://health.gov.mv/storage/uploads/jo6xxlYr/mg4nsbtq.pdf

Fallati, L., Castiglioni, S., Galli, P., Riva, F., Gracia-Lor, E., González-Mariño, I., ... & Zuccato, E. (2020). Use of legal and illegal substances in Malé (Republic of Maldives) assessed by wastewater analysis. Science of the total environment, 698, 134207.

Maldives Bureau of Statistics. (n.d.). Census 2022. Census.gov.mv. https://census.gov.mv/2022/

Mortimore, G., & Stimson, G. (2010). A process and systems evaluation of the drug treatment and rehabilitation services in the Maldives. *South Asia: World Bank*.

National Drug Agency. (n.d.). NDA. https://nda.gov.mv/en